DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: WHITES RESIDENTIAL TREATMENT FACILITY INC (310174)

Address: 4020 W BURLEIGH, MILWAUKEE, WI 53210

License Status: REGULAR

Licensed/Certified/Registered 06/28/1994

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0091280 End Date: 09/18/2003 Type: OTHER Purpose: VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008606 Served 10/25/2003

<u>Deficiencies Cited</u> <u>Subject Area</u>

83.43(4)(b)3 BATTERY OPERATED AND 5 YEAR DELAY

<u>Compliance</u> Verified Corrected

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 10/20/2003 SOD #10008606 Appealed: No

Sanctions

OTHER SANCTION

FORFEITURE---83.43(4)(b)3

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